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ZENITH ELECTRONICS CORP

8473918003

P. 02/02

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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ZENITH ELECTRONICS CORPORATION
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Sharon Kroll

(Depositor's name)

Sharon Kroll

(Signature)

January 8, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/595,068	06/15/2000	David S. Tait	7125	9142

TITLE OF INVENTION: SMART ANTENNA FOR RF RECEIVERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	03/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRINH, SONNY	2685	455-277100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Zenith Electronics Corporation 2000 Millbrook Drive, Lincolnshire, Illinois 60069

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies _____

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 260175 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

Jack Kroll

1/8/04

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ZENITH ELECTRONICS CORPORATION
2000 Millbrook Drive
Lincolnshire, Illinois 60069
phone (847) 941-8011

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FAX NUMBER (847) 941-8003

Date: January 8, 2004

To: Mail Stop Issue Fee
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Fax No.: 703/ 746-4000

From: Jack Kail

Re: U.S. serial no. 09/595,068 (D-7125)

Number of Pages Including Cover Page: 2

Following is the completed and signed Fee Transmittal form (part B) for the above referenced patent application.